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MARITIME MEDICAL CARE INC.

ANNUAL REPORT

TO THE MINISTER OF
HEALTH AND FITNESS
PROVINCE OF NOVA SCOTIA

For the year ended March 31, 1991

92-00184/

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THE TWENTY-THIRD ANNUAL REPORT

of

MARITIME MEDICAL CARE INCORPORATED

to

THE HONOURABLE MINISTER OF HEALTH AND FITNESS

of the

PROVINCE OF NOVA SCOTIA

Introduction

This is the 23rd Annual Report of Maritime Medical Care Incorporated to the Honourable Minister of Health and Fitness of the Province of Nova Scotia. The report details the performance of Maritime Medical Care Inc. in carrying out its responsibilities as administrator of the Medical Services Insurance (M.S.I.) programs for the Province of Nova Scotia. The report covers the 12 month period April 1, 1990 to March 31, 1991, and includes appropriate comparative data from previous reporting periods.

Maritime Medical Care Incorporated was founded in 1948 under the provisions of Chapter 197 of the Acts of Nova Scotia as a non-profit organization to operate in the field of prepaid health services programs. The Corporation is based in Dartmouth, Nova Scotia, and operates in all Atlantic Provinces. In July, 1967, Maritime Medical Care entered into an Agreement with the Minister of Health of the Province of Nova Scotia to participate in the design and to administer the Province's medical care insurance plan, which following 18 months of planning was implemented on April 1, 1969. The Agreement with the Minister of Health and Fitness does not alter the Corporation's activities in the private sector and Maritime Medical continues to be a major underwriter of prepaid health and dental programs for groups and individuals in Atlantic Canada.

Over the years, as the government introduced new programs including optometric services, dental services for children, and a prescription drug program for senior citizens, Maritime Medical assimilated the administration of these programs into its operations. The Corporation borrowed extensively from its expertise in the field of private health insurance to provide efficient administrative services from the date of implementation of the original medicare program as well as the programs subsequently added. In addition to its duties handling the M.S.I. programs, Maritime Medical is also involved in other public programs including claims processing services for some aspects of the Hospital Insurance Plan and operating the Prescription Drug Programs of the Department of Community Services. The administration of these programs is integrated with the M.S.I. processes.

Functions

Maritime Medical Care's present functions in connection with the M.S.I. programs include:

- The registration of all "recipients" and "providers" of insured services.
- The handling of all communications with recipients and providers respecting their entitlement and responsibilities under the various M.S.I.programs.
- The receipt, assessment and payment of all M.S.I. claims for insured services in accordance with tariffs established by the Health Services and Insurance Commission.
- The development and operation of appropriate review and audit procedures for verifying M.S.I. eligibility and benefit payments.
- The coordination of the activities of the Review Committees of the Health Services and Insurance Commission including the carrying out of investigations and preparation of all cases for review.

- The preparation of any cases called for "Due Inquiry" by the Health Services and Insurance Commission in accordance with the Health Services and Insurance Act, and the presentation of such cases to the Health Services and Insurance Commission.
- The design of all systems and procedures related to the performance of its administrative functions.
- The development, maintenance and analysis of statistics pertaining to all aspects of the M.S.I. Programs.
- The compilation, production and distribution of the Nova Scotia Drug Formulary.
- The provision of resource staff support for various Committees of the Health Services & Insurance Commission.
- Such other assignments as the Minister of Health and Fitness or the Commission may from time to time request.

Statistical Reports

Maritime Medical Care prepares annual detailed statistical reports on all aspects of the M.S.I. operation for the Health Services & Insurance Commission. A number of these reports will normally be included in the Health Services & Insurance Commission's Annual Reports. The tables and statistical information included in this report are not intended to duplicate reports presented elsewhere but, to be more in the nature of an Executive Summary and to present comparative data over an extended period of time.

Financial Management

The Corporation is pleased to submit herewith as Appendix "A" the final statement of costs incurred in the administration of the M.S.I. programs for the fiscal year ended March 31, 1990.

- Administrative Efficiency

In the year under review, Maritime Medical's administrative expense, expressed as a percentage of the total of all benefits paid under the public programs was 2.4%. This 2.4% expense ratio represents the lowest ratio achieved since the inception of the MSI program.

Table 1 and the accompanying graphs outline the administrative costs and cost ratios associated with Maritime Medical Care's administration of the MSI programs.

Table 1

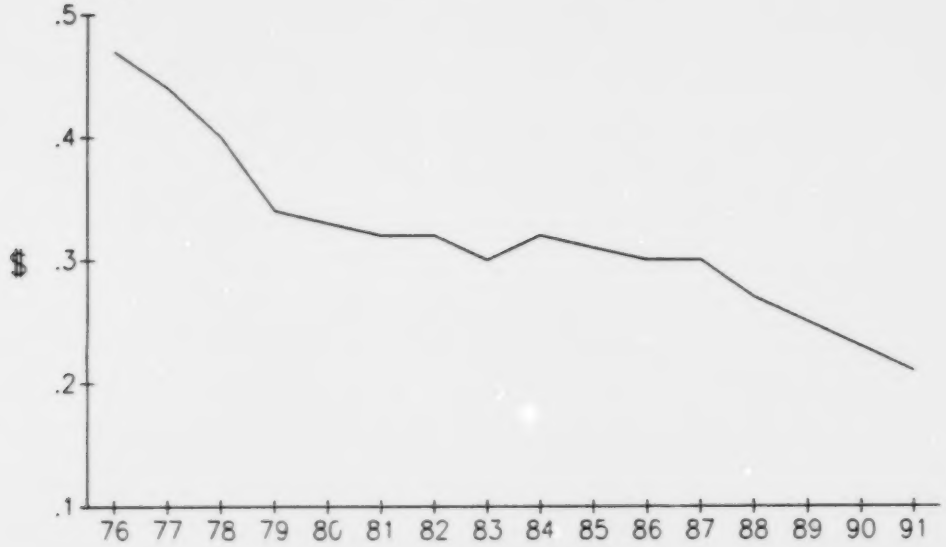
M.M.C. Administration Expense Productivity Indicators
in Constant 1971 Dollars

Fiscal Year	Admin. Expense	Per Claim	Percent of Benefits
1970-71	$1,768	$0.65	5.8%
1975-76	2,293	0.47	5.0
1976-77	2,256	0.44	4.7
1977-78	2,115	0.40	4.4
1978-79	1,888	0.34	3.9
1979-80	1,921	0.33	3.8
1980-81	1,905	0.32	3.8
1981-82	1,927	0.32	3.6
1982-83	2,003	0.30	3.3
1983-84	2,167	0.32	3.4
1984-85	2,218	0.31	3.2
1985-86	2,239	0.30	3.0
1986-87	2,304	0.30	3.0
1987-88	2,236	0.27	2.8
1988-89	2,329	0.25	2.7
1989-90	2,135	0.23	2.5
1990-91	2,029	0.21	2.4
Percent Change			
1975-76 to 1990-91	-11.5%	-55.3%	

Note: The first full financial year of the MSI Medicare Plan was 1970-71. The first full year that included the MSI Medicare, Pharmacare and Children's Dental Plans was 1975-76.

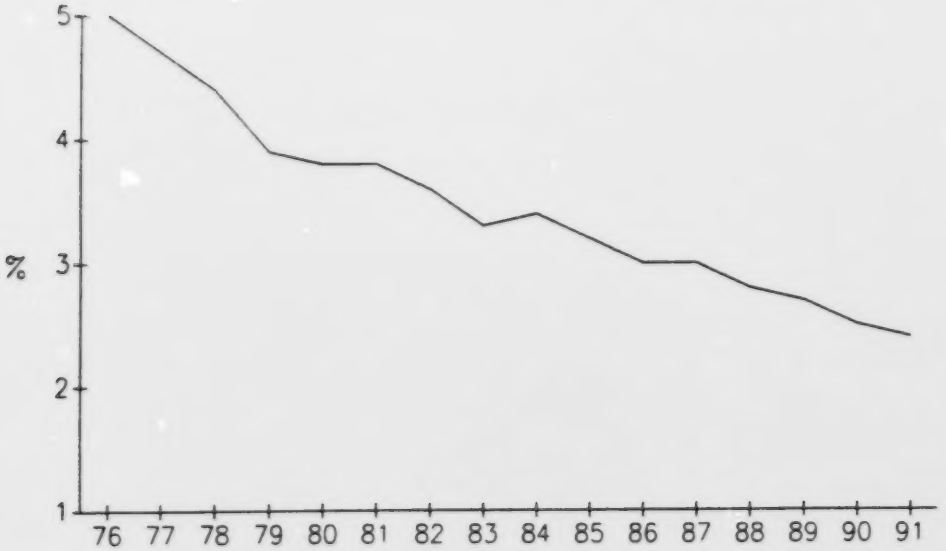
MARITIME MEDICAL CARE ADMINISTRATIVE EXPENSE PER CLAIM

Constant 1971 Dollars



Fiscal Year Ending

MARITIME MEDICAL CARE ADMINISTRATIVE EXPENSE
AS A PERCENT OF M.S.I. EXPENDITURE



Fiscal Year Ending

- Cost Apportionment

Maritime Medical Care uses an organizational structure that provides for an efficient cost-effective operation for both its MSI and Private Sector operations while ensuring an accurate apportionment of administrative expenses between the two divisions of activity. Departments may be structured as totally engaged in MSI functions, totally engaged in MMC private functions or shared between the two divisions. Cost apportionment formulae have been developed to ensure equitable attribution of administrative expenses.

- Audit

Under Maritime Medical Care's Agreement with the Minister of Health and Fitness, the operation of Maritime Medical Care is subject to audit by the Auditor General of the Province of Nova Scotia. Audits are conducted on a regular basis by the Auditor General including a regular audit completed during the year under review. As in all past audits, the conclusion of the Auditor General was that Maritime Medical Care continues to satisfactorily carry out its functions in accordance with the Agreement in place.

Staffing

The staff of Maritime Medical Care are engaged in three categories of activity;

- Totally assigned to MSI activities
- Totally assigned to MMC Private Sector activities
- Shared activities

The number of full-time equivalents assigned to MSI responsibilities at March 31, 1991, was 171. This is a reduction of 6 from the previous year's level of 177.

Productivity and Performance Indicators

The primary function of Maritime Medical Care in it's role as administrator of the M.S.I. programs is the processing of claims. For this reason, it is appropriate to use claims processing data in choosing a performance indicator.

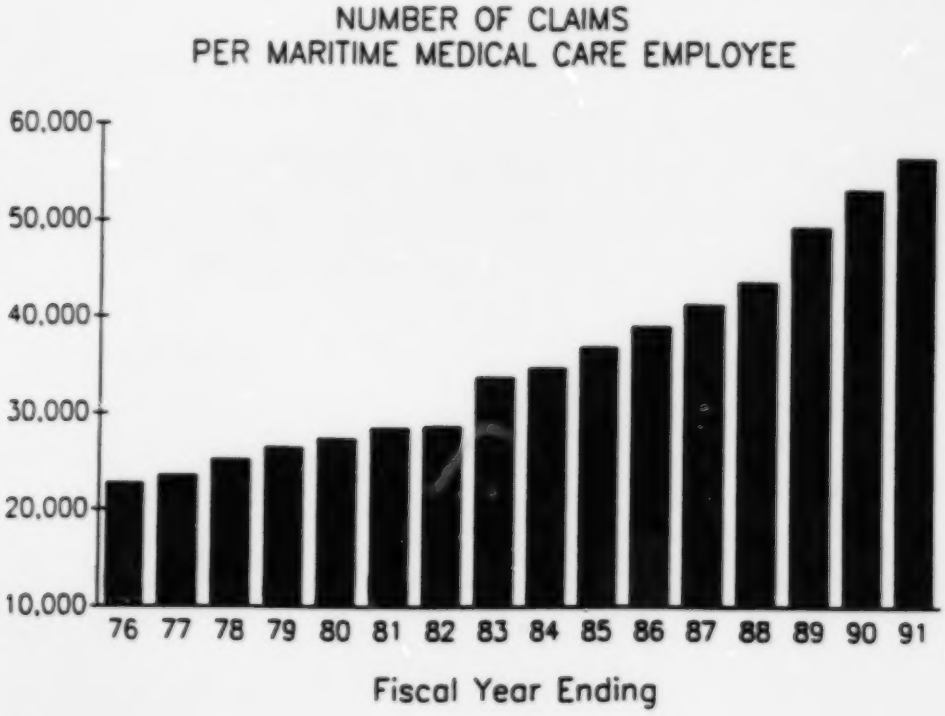
Although this is a meaningful performance indicator, it should be understood that it does not take into account the many other activities associated with the MSI administration. Other key activity areas with significant resource allocation, include maintainance of the complete MSI Registration file, audit functions including field audit, and general communication responsibilities including all inquiries with residents and providers.

Table 2 that follows compares the staff numbers and the level of productivity achieved by Maritime Medical Care staff for the past five years. The accompanying graph illustrates the productivity increases since 1976.

TABLE 2

Maritime Medical Care - Performance Indicators

	1985-86	1986-87	1987-88	1988-89[2]	1989-90	1990-91
No. of claims processed[1] (in thousands)	7,529	7,985	8,329	9,112	9,408	9,658
Percent increase	4.3%	6.1%	4.3%	9.4%	3.2%	2.7%
No. of MSI employees (full time equivalent)	193	194	191	185	177	171
Claims processed per employee	38,950	41,265	43,552	49,256	53,151	56,479
Percent increase	5.8%	5.9%	5.5%	13.1%	7.9%	6.3%



1 Includes all M.S.I. programs and the prescription drug programs of the Department of Community Services.

2 There were 27 payments to physicians and optometrists in 1988-89, instead of the normal 26.

The increase in productivity has been a continuation of the long-term trend that has been a notable feature of Maritime Medical Care's operation.

These productivity increases have been achieved primarily through the emphasis made by Maritime Medical and its staff on streamlining operations and increasing productivity. In addition, technology changes are now having an increasing impact owing to the movement to electronic submission of claims by the various providers. At the end of the fiscal year, 27% of claims were being submitted in this format. Clearly, further productivity gains will be possible as the trend to electronic submission continues.

Maritime Medical Care is continuing its efforts to encourage electronic claims submissions by providers. In addition to development of the facility for computer tape and diskette submissions, a system was completed at the end of the year to permit the submission of claims for physicians' services via telecommunication. This service will be extended to pharmacies in the coming year.

Patient Utilization of Benefits

It is estimated that 883,100 Nova Scotians were eligible for the Medical, Dental Surgical and Optometric benefits of M.S.I. Of this number, 199,200 were also eligible for the Children's Dental Plan and 111,800 were eligible for the M.S.I. Pharmacare Plan. A summary showing the average number of persons eligible during the year and those utilizing benefits in each of the plans is shown in Table 3.

TABLE 3

Utilization of Major MSI Benefits

	Persons Eligible	Persons Utilizing Benefits	
		Number	Percent
Medical	883,100	808,000	91.5
Optometric	883,100	147,500	16.7
Dental Surgical	883,100	9,300	1.1
Children's Dental	199,200	118,700	59.6
MSI Pharmacare	111,800	105,000	93.9

Claims Assessment, Audit and Review

One of Maritime Medical's major administrative functions is the assessment, audit and utilization review of all M.S.I. claims. The vast majority of this work is performed by M.M.C. staff which includes medical, dental and pharmaceutical consultants.

Maritime Medical also avails itself of professional counsel from members of the Medical Society of Nova Scotia and the Nova Scotia Dental Association who have been engaged by Maritime Medical Care to assist in the review of complex claims. Medical and Dental Claims Evaluation Committees have been established for this purpose.

The Corporation continued with its claims audit program by seeking patient verification of a random selection of paid Medical, Dental, Optometric and Pharmacy claims, as well as special or focused audits where appropriate.

Additionally, it has applied appropriate audit techniques to Pharmacare claims which included 223 on-site audits of pharmacies and dispensing physicians.

There are three standing Review Committees; Medical, Dental, and Pharmacy. These Committees report to the Health Services and Insurance Commission while Maritime Medical Care provides all necessary research, investigative, legal and other administrative staff support.

The Medical Review Committee is responsible for monitoring all activities relating to the provision of insured services by physicians, and the utilization of physicians' services by patients.

The Medical Review Committee referred two cases to the Health Services and Insurance Commission that caused a "Due Inquiry" under the Health Services and Insurance Act to be conducted by the Commission.

The Pharmacy Review Committee reviewed several cases referred through the Maritime Medical Care audit program.

The Dental Review Committee reviewed a number of dentists' practice profiles. One case was referred to the Dental Board of Nova Scotia and one case for Due Inquiry to the Health Services and Insurance Commission.

Arising out of the audit and review programs, recoveries of payments on improper claims were made by Maritime Medical Care as follows:

Medicare Program	-	$ 56,800
Pharmacare Program	-	40,100
Dental Program	-	1,000

Professional Relations

Maritime Medical Care has a program of regular liaison with all professional groups whose services are insured under the M.S.I. programs. Emphasis continues to be placed on the physicians services program which is the largest and therefore has the greatest impact administratively.

Regular information seminars for the providers of insured health services and their staffs continue to be an effective means of communication. Through the cooperation of the professional organizations, Maritime Medical receives invitations to Branch Medical Society meetings and regional Dental and Pharmacy Association meetings. M.S.I. matters of current interest are discussed and questions answered.

Periodic visits by Maritime Medical personnel to providers of insured services and the issuance of bulletins are also part of our professional relations program.

Computer Services

The Corporation continues to work in close co-operation with the Systems and Computer Services Division of the Department of Government Services. This Department provides most of the computing services for the public programs administered by Maritime Medical Care.

A number of ancillary MSI computer programs are being operated on the Maritime Medical Care mainframe computer as this has proven to be the most expeditious and efficient approach to implementing several applications. Programs handled in this manner include:

- Aspects of the Reciprocal Billing System for payment of physicians services for out-of-province residents
- Electronic transfer of funds to providers
- Claims submitted on diskette by pharmacies and physicians by magnetic or electronic means

Maritime Medical Care makes extensive use of Personal Computers including direct linkage to the Provincial Government Mainframe Computer. Many of the regular information reports are prepared by Maritime Medical Care from MSI data transferred from the Provincial Computer Center to Maritime Medical Care Personal Computers.

Liaison with Health Services & Insurance Commission

The Corporation worked closely with the staff of the Health Services & Insurance Commission and as well as acted in a resource capacity with the Commission and its Committees.

Statistical Tables

A number of Statistical Tables on the various MSI programs are included with each Maritime Medical Care Annual Report and are included again this year. Tables (Nos. 11, 12, 13) are intended to provide an overview of the plan expenditures over several years, highlighting the rate of growth of expenditures and the changing ratio of expenditures of the individual plans.

Reference to these tables will illustrate that costs of the Pharmacare Plan as a percentage of overall expenditure decreased from 23.7% in 1989/90 to 21.2% in 1990-91. This decrease reflected the impact of a co-pay feature that was implemented during the year.

Organizational Liaison

The Board of Directors of Maritime Medical Care consists of 13 members of which two are ministerial appointments. Observer privileges at all Board meetings are afforded the Deputy Minister of Health and the Chairman of the Health Services and Insurance Commission. The Chairman of Maritime Medical Care's Board has observer privileges at Health Services and Insurance Commission meetings.

Summary of Administered Programs

Following are the public programs currently administered by Maritime Medical Care.

M.S.I. Programs	Implementation Date
Medical Care	April 1, 1969
Dental Surgical	April 1, 1969
Optometric	December 1, 1973
Children's Dental Plan	July 1, 1974
Pharmacare	October 1, 1974
Cystic Fibrosis (Drugs)	October 1, 1976
Severe Mental Retardation (In-Hospital Dentistry)	January 1, 1977
Cleft Palate Dentistry	December 1, 1977
Diabetes Insipidus (Drugs)	December 1, 1978
Prosthetic Appliances	January 1, 1981

In addition to the M.S.I. programs the Corporation also performs the claims assessment and payment functions for the Department of Community Services' Prescription Drug Program for the Disabled and the Diabetic Assistance Program.

Acknowledgements

The Corporation wishes to acknowledge the assistance and the co-operation it has received in the performance of its M.S.I. duties and responsibilities from:

The Department of Health
The Health Services & Insurance Commission
The Medical Society of Nova Scotia
The Nova Scotia Pharmaceutical Society
The Pharmacy Association of Nova Scotia
The Nova Scotia Dental Association
The Systems and Computer Services Division
Department of Government Services
The Workers' Compensation Board

Respectfully submitted,

MARITIME MEDICAL CARE INCORPORATED

Robert S. Oliver, M.D.
Chairman of the Board

David L. McAvoy,
President & Chief Executive Officer

APPENDIX A

MARITIME MEDICAL CARE INCORPORATED

Administrative Costs - Public Programs
For The Year Ended March 31, 1991

	M.S.I.	Community Services
	(000's)	
Direct Costs		
Data processing equipment and supplies	$ 620	$ 28
Depreciation	27	1
Employees' salaries and benefits	4,176	136
Equipment rental and service	87	4
Interest and bank charges	66	-
Office premises	27	-
Printing and office	371	11
Professional fees	68	1
Telephone, postage and cartage	114	2
Travel	86	4
Other, net	27	4
	5,669	191
Shared Costs		
Accounting	244	*
Personnel & administrative services	680	-
Building occupancy	493	-
Cafeteria	39	-
Data processing	82	-
General administration	256	*
Pharmacy assessment	210	*
	2,004	*
GRAND TOTAL	$ 7,673	$ 191

(*) Costs allocated to Community Services Programs included in Direct Costs.

M.S.I. STATISTICAL TABLES

FISCAL 1990-91

Table 1

MSI Expenditure 1990-91[1]

	Expenditure	Percent of Total
Physicians Services	$230,788,291	72.2%
Prescription Drugs[2]	67,861,707	21.2
Dentistry	14,850,388	4.7
Optometric	5,061,557	1.6
Prosthetic Services	892,234	0.3
TOTAL	$319,454,177	100.0%

1. Data in this table and the tables that follow are based on date of payment rather than date of service.

2. Includes $194,956 paid to the Cancer Society, and $219,451 for the Growth Hormones Program introduced in 1987-88.

Table 2

Five Year Comparison of Selected MSI Statistics

	1986-87	1987-88	1988-89	1989-90	1990-91
Insured Population (000)	862	868	870	875	883
Physicians Paid	1,715	1,731	1,806	1,858	1,900
Dentists Paid	351	367	386	385	397
Optometrists Paid	58	53	56	59	65
Pharmacies Paid	247	246	244	250	
Total MSI Payments (000)	$243,626	$263,993	$296,743	$310,828	$319,454
Claims Processed (000)	7,714	8,043	8,782	9,039	9,244
Total Insured Services (000)	9,635	9,974	10,570	10,626	10,450
Expenditure Per Insured Person	$282.63	$304.14	$341.08	$355.23	$361.78
Administrative Expense (000)	$7,328	$7,402	$7,908	$7,626	$7,673
Administrative Expense As Percent of Amount Paid	3.0%	2.8%	2.7%	2.5%	2.4%

Table 3

Growth of MSI Plans

1986-87 to 1990-91

	Physicians Services & Dental Surgical[1]			Optometric Services			Children's & Special Dental Plans[2]			Prescription Drugs[3]		
	Insured	Beneficiaries	Paid Per Insured	Insured	Beneficiaries	Paid Per Insured	Insured	Beneficiaries	Paid Per Insured	Insured	Beneficiaries	Paid Per Insured
1986-87	862,100	778,700	$209.39	862,100	114,800	$3.75	204,800	127,900	$58.23	105,200	98,000	$450.28
1987-88	867,900	788,100	221.22	867,900	125,100	4.18	201,700	127,500	61.47	107,200	100,800	515.03
1988-89	869,500	801,200	247.28	869,500	141,900	4.86	200,000	126,300	61.76	108,200	102,700	592.54
1989-90	874,600	801,400	249.64	874,600	144,600	5.36	199,500	131,100	67.45	110,700	104,700	661.24
1990-91	883,100	808,000	264.26	883,100	147,500	5.73	199,200	118,700	61.60	111,800	105,000	603.29

NOTE: Estimates of Insured Persons are as of October 1 each year.

1. Physicians services and dental-surgical services were the initial MSI Plans introduced in 1969, and were cost-shared with the federal government prior to April 1977. In Tables 5 and 6 physicians services and dental-surgical services are shown separately.

2. Prior to July 1, 1990 the Childrens' Dental Plan covered all children under 16 years of age. Effective July 1, 1990 the Plan covers children up to 14 years of age. Children at the School For The Blind are covered regardless of age. Other dental plans include persons who are severely mentally retarded, or who have a cleft palate.

3. Prescription drug coverage includes persons over 65 years of age. Drugs are also covered for persons who suffer from cystic fibrosis or diabetes insipidus. Paid per insured does not include payments to the Cancer Society and payments associated with the Growth Hormones Program. Cancer Society and Growth Hormone payments are included in Tables 1, and 2.

Table 4

MSI Fee-For-Service Payments 1990-91

Number of Providers by County[1]

County	Physicians[2] Services	Dentists Services	Optometrists Services	Prescription[3] Drugs
Annapolis	23	6	2	7
Antigonish	45	9	-	4
Cape Breton	176	40	11	31
Colchester	67	22	6	12
Cumberland	51	9	1	13
Digby	20	6	1	7
Guysborough	11	2	-	5
Halifax	1,055	209	24	98
Hants	47	9	2	16
Inverness	19	9	2	8
Kings	102	21	3	21
Lunenburg	78	18	6	12
Pictou	66	17	5	15
Queens	13	4	-	4
Richmond	8	2	-	2
Shelburne	14	5	-	6
Victoria	9	1	-	2
Yarmouth	49	8	2	9
NOVA SCOTIA	1,853	397	65	272

1. County refers to the counties in which providers rendering insured services were located as of March 31, 1991.

2. Does not include 47 salaried physicians who performed insured services for which institutions employing them were reimbursed.

3. Includes 246 pharmacies and 26 other providers.

Table 5

MSI Payments for Physicians Services

Services and Amounts Paid

1986-87 to 1990-91

Services[1]

	Services	Services Per Insured Person	Percent Change Per Insured Person
1986-87	6,660,669	7.73	3.8%
1987-88	6,841,568	7.88	1.9
1988-89	7,305,730	8.40	6.3
1989-90	7,224,792	8.26	-1.7
1990-91	7,336,807	8.31	0.6

Amount Paid[2]

	Total Paid	Paid Per Insured Person	Percent Change Per Insured Person
1986-87	$178,179,570	$206.68	6.5%
1987-88	189,424,623	218.26	5.6
1988-89	212,320,253	244.19	11.9
1989-90	215,679,842	246.60	1.0
1990-91	230,788,291	261.34	6.0

1. Services include fee-for-service only.

2. Includes payments to hospitals and institutions with respect to insured services performed by salaried physicians, as well as fee-for-service payments.

Table 6

MSI Payment for Dental Surgical Services

Services and Amounts Paid

1986-87 to 1990-91

	Services	Paid	Paid Per Insured Person	Percent Change Amount Paid Per Insured Person
1986-87	31,932	$2,336,770	$2.71	8.0%
1987-88	32,722	2,575,378	2.97	9.6
1988-89	32,975	2,686,084	3.09	4.0
1989-90	30,841	2,658,119	3.04	-1.6
1990-91	29,199	2,580,311	2.92	-3.9

Table 7

MSI Payments for Children's and Special Dental Plans[1]

Services and Amounts Paid

1986-87 to 1990-91

	Services	Paid	Paid Per Insured Person	Percent Change Amount Paid Per Insured Person
1986-87	524,640	$11,925,070	$58.23	-0.2%
1987-88	516,909	12,398,795	61.47	5.6
1988-89	504,191	12,352,661	61.76	0.5
1989-90	517,911	13,456,200	67.45	9.2
1990-91	458,751	12,270,077	61.60	-8.7

1. Special dental plans include persons who have a cleft palate, persons who are severely mentally retarded, persons at the School For the Blind who are 14 years of age or older and uninsured services to persons over 14 years of age approved under Special Consideration. Amounts paid in 1990-91 were $171,439, $27,231, $1,532 and $8,335 respectively.

Table 8

MSI Payments for Optometric Services

1986-87 to 1990-91

	Services	Paid	Paid Per Insured Person	Percent Change Amount Paid Per Insured Person
1986-87	118,618	$3,232,093	$3.75	17.6%
1987-88	129,176	3,626,354	4.18	11.5
1988-89	144,272	4,226,281	4.86	16.3
1989-90	149,399	4,690,133	5.36	10.3
1990-91	152,621	5,061,557	5.73	6.9

Table 9

MSI Payments for Prescription Drugs

1986-87 to 1990-91

Prescriptions

	Prescriptions Dispensed	Prescriptions Per Insured Person	% Change Per Insured
1986-87	2,299,255	21.9	5.8%
1987-88	2,453,975	22.9	4.6
1988-89	2,582,960	23.9	4.4
1989-90	2,702,704	24.5	2.5
1990-91	2,472,249	22.2	-9.4

Amount Paid[1]

	Amount Paid	Paid Per Insured Person	% Change Per Insured
1986-87	$47,369,142	$450.28	15.0%
1987-88	55,211,558	515.03	14.4
1988-89	64,112,769	592.54	15.1
1989-90	73,198,814	661.24	11.6
1990-91	67,447,300	603.29	-8.8

1. Amount paid includes the MSI Pharmacare Plan for persons over 65, the Cystic Fibrosis Plan, and the Diabetes Insipidus Plan. During 1990-91 payments for the Cystic Fibrosis and Diabetes Insipidus Plans were $793,214 and $68,636 respectively. Payments under the Cystic Fibrosis and Diabetes Insipidus Plans are made monthly to one provider and the number of prescriptions shown above does not include prescriptions dispensed under these plans. Amount paid does not include $194,956 reimbursed to the Cancer Society and $219,451 associated with the Growth Hormones Program.

Table 10

Community Services Pharmacare

Payments for Insured Prescription Drugs[1]

1986-87 to 1990-91

Prescriptions

	Prescriptions Dispensed	Prescriptions Per Insured Person	% Change Per Insured
1986-87	355,788	24.7	10.3%
1987-88	379,316	25.6	3.6
1988-89	406,955	26.4	3.1
1989-90	431,086	27.6	4.5
1990-91	457,496	29.3	6.2

Amount Paid

	Amount Paid	Paid Per Insured Person	% Change Per Insured
1986-87	$ 7,019,376	$487.46	20.0%
1987-88	8,121,193	548.73	12.6
1988-89	9,480,304	615.60	12.2
1989-90	10,888,437	697.98	13.4
1990-91	12,166,047	779.87	11.7

1. Includes the Prescription Drug Plan for disabled persons, which has been administered by Maritime Medical Care since September 1981, and the Diabetic Assistance Plan, which has been administered since September, 1982.

Table 11

M.S.I. Expenditure 1975-76 to 1990-91[1]

Fiscal Year	Physicians Services	Prescription Drugs	Dentistry	Optometric	Prosthetic[2] Services	Total
1975-76	$ 55,348,064	$ 7,193,411	$ 2,624,692	$ 770,768	$ -	$ 65,936,935
1976-77	61,107,308	8,745,019	2,870,409	763,881	-	73,486,617
1977-78	65,051,137	10,539,971	3,667,431	884,453	-	80,142,992
1978-79	70,928,849	12,459,980	4,993,189	966,688	-	89,348,706
1979-80	78,306,480	14,668,935	6,275,023	1,134,005	-	100,384,443
1980-81	87,788,152	17,394,425	7,631,788	1,193,647	-	114,008,012
1981-82	101,446,850	20,994,671	9,690,851	1,396,144	242,079	133,770,595
1982-83	124,952,265	26,893,097	11,939,131	1,744,594	303,376	165,832,463
1983-84	135,063,879	30,980,434	12,786,178	1,933,363	313,732	181,077,586
1984-85	151,223,661	34,759,182	13,626,340	2,302,845	485,789	202,397,817
1985-86	166,509,795	40,446,006	14,228,138	2,735,404	451,485	224,370,828
1986-87	178,179,570	47,454,991	14,261,840	3,232,093	497,036	243,625,530
1987-88	189,424,623	55,392,941	14,974,173	3,626,354	574,939	263,993,030
1988-89	212,320,253	64,548,203	15,038,745	4,226,281	609,177	296,742,659
1989-90	215,679,842	73,595,229	16,114,319	4,690,133	748,918	310,828,441
1990-91	230,788,291	67,861,707	14,850,388	5,061,557	892,234	319,454,177

1. M.S.I. Expenditure Data is based on date of payment, not date of service.

2. The Prosthetic Appliances program commenced January, 1981.

Table 12

M.S.I. Expenditure 1975-76 to 1990-91
Percent of Total

Fiscal Year	Physicians Services	Prescription Drugs	Dentistry	Optometric	Prosthetic[1] Services	Total
1975-76	83.9%	10.9%	4.0%	1.2%	-	100.0%
1976-77	83.2	11.9	3.9	1.0	-	100.0
1977-78	81.2	13.1	4.6	1.1	-	100.0
1978-79	79.4	13.9	5.6	1.1	-	100.0
1979-80	78.0	14.6	6.3	1.1	-	100.0
1980-81	77.0	15.3	6.7	1.0	-	100.0
1981-82	75.8	15.7	7.3	1.0	0.2%	100.0
1982-83	75.3	16.2	7.2	1.1	0.2	100.0
1983-84	74.6	17.1	7.0	1.1	0.2	100.0
1984-85	74.7	17.2	6.7	1.1	0.3	100.0
1985-86	74.2	18.0	6.4	1.2	0.2	100.0
1986-87	73.1	19.5	5.9	1.3	0.2	100.0
1987-88	71.7	21.0	5.7	1.4	0.2	100.0
1988-89	71.6	21.7	5.1	1.4	0.2	100.0
1989-90	69.4	23.7	5.2	1.5	0.2	100.0
1990-91	72.2	21.2	4.7	1.6	0.3	100.0

1. The Prosthetic Appliances program commenced January, 1981.

Table 13

Increase in M.S.I. Expenditure and Percentage Increase 1975-76 to 1990-91

Fiscal Year	Physicians Services ($000)		Prescription Drugs ($000)		Dentistry ($000)		Optometric ($000)		Prosthetic[2] Services ($000)		Total ($000)	
1975-76	-	-	-	-	-	-	-	-	-	-	-	-
1976-77	$ 5,759	10.4%	$ 1,552	21.6%	$ 246	9.4%	$ -7	-0.9%	-	-	$ 7,550	11.5%
1977-78	3,944	6.5	1,795	20.5	797	27.8	121	15.8	-	-	6,656	9.1
1978-79	5,878	9.0	1,920	18.2	1,326	36.2	112	9.3	-	-	9,206	11.5
1979-80	7,378	10.4	2,209	17.7	1,282	25.7	137	17.3	-	-	11,036	12.4
1980-81	9,482	12.1	2,725	18.6	1,357	21.6	60	5.3	-	-	13,624	13.6
1981-82	13,314	15.1	3,600	20.7	2,059	27.0	202	17.0	-	-	19,418	17.0
1982-83	23,505	23.2	5,898	28.1	2,248	23.2	348	25.0	$ 61	25.3%	32,062	24.0
1983-84	10,112	8.1	4,087	15.2	847	7.1	189	10.8	10	3.4	15,245	9.2
1984-85	16,160	12.0	3,779	12.2	840	6.6	369	19.1	172	54.8	21,320	11.8
1985-86	15,286	10.1	5,687	16.4	602	4.4	433	18.8	-34	-7.1	21,973	10.9
1986-87	11,670	7.0	7,009	17.3	34	0.2	497	18.2	46	10.1	19,255	8.6
1987-88	11,245	6.3	7,938	16.7	712	5.0	394	12.2	78	15.7	20,368	8.4
1988-89	22,896	12.1	9,155	16.5	65	0.4	600	16.5	34	6.0	32,750	12.4
1989-90	3,360	1.6	9,047	14.0	1,076	7.2	464	11.0	140	22.9	14,086	4.7
1990-91	15,108	7.0	-5,734	-7.8	-1,264	-7.8	371	7.9	143	19.1	8,626	2.8

1. The Prosthetic Appliances program commenced January, 1981.